

AMENDED IN ASSEMBLY APRIL 13, 2009

CALIFORNIA LEGISLATURE—2009—10 REGULAR SESSION

**ASSEMBLY BILL**

**No. 1314**

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**Introduced by Assembly Member Jones**

February 27, 2009

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An act to add Article 5.5 (commencing with Section 14182) to Chapter 7 of Part 3 of Division 9 of the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 1314, as amended, Jones. Medi-Cal: health care coverage.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income persons receive health care benefits. The Medi-Cal program is, in part, governed and funded by federal Medicaid provisions.

~~This bill would require the department, no later than February 1, 2010, in consultation with the Legislature, to develop and submit an application to the federal Centers for Medicare and Medicaid Services for a waiver that would meet certain objectives, the California Health and Human Services Agency, in consultation with specified entities, to develop a plan to enact comprehensive reforms to the California health care system and to make recommendations for statutory changes necessary to implement the plan. The plan would include strategies to accomplish various goals, including, but not limited to, expanding health care coverage for low- and moderate-income children and adults through a shared responsibility approach that includes contributions from individuals, employers, and the government, and reducing the number of uninsured persons in the state. The bill would condition~~

~~implementation of the waiver upon the enactment of subsequent statutory authorization. The agency would be required to provide the plan and recommendations to the Legislature no later than April 1, 2010.~~

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

SECTION 1. Article 5.5 (commencing with Section 14182) is added to Chapter 7 of Part 3 of Division 9 of the Welfare and Institutions Code, to read:

Article 5.5. Health Care Coverage Expansion

~~14182. (a) The State Department of Health Care Services, no later than February 1, 2010, in consultation with the Legislature, shall develop and submit an application to the federal Centers for Medicare and Medicaid Services for a waiver that would meet all of the following objectives: The California Health and Human Services Agency, in consultation with consumers, health care providers, and other health care stakeholders, shall develop a plan to enact comprehensive reforms to the California health care system and make recommendations for statutory changes necessary to implement the plan. The agency shall provide the plan and statutory recommendations to the Legislature no later than April 1, 2010. The plan shall include strategies to accomplish all of the following:~~

~~(1)~~

(a) Expand health care coverage for low- and moderate-income children and ~~adults~~; adults, including assistance for those who are most unable to afford to pay for their own coverage, through a shared responsibility approach that includes contributions from individuals, employers, and the government.

~~(2)~~

(b) Reduce the number of uninsured persons in the state.

~~(3)~~

(c) Maximize federal funds for health care coverage and ensure that California receives federal funds at the maximum allowable

1 level to match all available state and local expenditures for health  
2 care.

3 ~~(4)~~

4 (d) Establish appropriate provider fees to leverage federal  
5 resources and maximize state and local revenues for health care.

6 ~~(5)~~

7 (e) Revise and increase provider payments to ensure adequate  
8 access to primary and specialty health care for persons in state and  
9 local sponsored health care programs.

10 ~~(6)~~

11 (f) Reward health care providers for quality care and enhanced  
12 performance.

13 ~~(7)~~

14 (g) Secure funding and establish reimbursement mechanisms  
15 to support a vigorous and accountable health care safety net and  
16 delivery system.

17 ~~(8)~~

18 (h) Improve fee-for-service health care delivery systems in state  
19 and local health care programs to better coordinate and manage  
20 health care services, emphasize timely primary and preventive  
21 care, and reduce the use and overuse of high-cost emergency and  
22 hospital inpatient services.

23 ~~(9)~~

24 (i) Improve coordination and efficiency of state and local health  
25 care programs and mental health care programs.

26 ~~(b) If the federal Centers for Medicare and Medicaid Services~~  
27 ~~approves the waiver, the department shall only implement the~~  
28 ~~waiver upon enactment of subsequent statutory authorization.~~